

## INTENT TO ENROLL

### Account Information

GET Account Number	
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Purchaser's name	Social security number	E-mail address

### Beneficiary Information

Student's name	Social security number	E-mail address

### School Information

Student intends to enroll in the following school:	
<b>Washington State Public School:</b> <input type="checkbox"/> Central Washington University <input type="checkbox"/> Eastern Washington University <input type="checkbox"/> Western Washington University <input type="checkbox"/> The Evergreen State College <input type="checkbox"/> University of Washington <input type="checkbox"/> Washington State University <input type="checkbox"/> Community or Technical College named below: _____	<b>Out-of-State or Private School:</b> <input type="checkbox"/> Out-of-State School named below: School Name: _____ School Address: _____ _____ <input type="checkbox"/> Private School named below: School Name: _____ School Address: _____ _____
Academic Year : <input type="checkbox"/> 05-06 <input type="checkbox"/> 06-07   Student intends to enroll during the following terms:	
<input type="checkbox"/> Fall Quarter/Semester <input type="checkbox"/> Winter Quarter/Semester	<input type="checkbox"/> Spring Quarter/Semester <input type="checkbox"/> Summer Quarter/Semester

### INFORMATION RELEASE

In compliance with the Family Educational Rights and Privacy Act of 1974 (FERPA), the undersigned Account Owner and Beneficiary *authorize the **Guaranteed Education Tuition Program** and the school listed above to disclose to each other personally identifiable information, including the Beneficiary's Social Security Number and any other account information necessary to make payment arrangements with the institution you have chosen.* The undersigned certify that the information provided on this form is true and correct to the best of their knowledge and belief. The undersigned understand that non-qualified distributions may be subject to a penalty and/or federal income tax on the earnings.

Signature of Purchaser	
Printed name of Purchaser	Date